

02-04-02

ET420197461US

4

THE ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

DOCKET NUMBER: AUS920010980US
DATE: 1-31-02

Assignee Name: International Business Machines Corporation
Assignee Residence: Armonk, New York

10/062329 PRO
01/31/02



Sir:

Transmitted herewith for filing is the Patent Application of:

Inventors: Stephen S. Breese, Stig Arne Olsson, Geetha Vijayan
For: Method and System for Probing in a Network Environment

Enclosed are:

Patent Specification and Declaration (3)

5 sheets of drawing(s). (Informal)

An assignment of the invention to International Business Machines Corporation (includes Recordation Form Cover Sheet).

A certified copy of a _____ application.

Information Disclosure Statement, PTO/SB/08A and B and copies of 17 references.

The filing fee has been calculated as shown below:

For	Number Filed	Number Extra	Rate	Fee
Basic Fee				\$ 740.00
Total Claims	46 - 20	26	x \$ 18 =	\$ 468.00
Indep. Claims	5 - 3	2	x \$ 84 =	\$ 168.00
MULTIPLE DEPENDENT CLAIMS PRESENTED	0	x \$280 =		\$ 0.00
			TOTAL	\$1376.00

Please charge my Deposit Account No. 09-0447 in the amount of \$1376.00. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0447. A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

By 

David A. Mims, Jr.
Registration No. 32,708
Intellectual Property Law Dept.
IBM Corporation
11400 Burnet Road
Austin, Texas 78758
Telephone (512) 823-0950

**POST OFFICE TO ADDRESSEE**

PO ZIP Code	Day of Delivery	Flat Rate Envelope
	<input type="checkbox"/> Next <input type="checkbox"/> Second	<input type="checkbox"/>
Date In	Postage	
Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	\$
Time In	Military	
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight	Int'l Alpha Country Code	COD Fee
lbs. ozs.		Insurance Fee
No Delivery	Acceptance Clerk Initials	Total Postage & Fees
<input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		\$

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> NAME OR SIGNATURE (Date _____) Additional instructions may be typed in block above Signature is requested when delivery is made to a business or organization. Signature of delivery agent or delivery employee (unless otherwise directed) constitutes valid proof of delivery. NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		
Customer Signature		

CUSTOMER USE ONLY**METHOD OF PAYMENT**

Express Mail Corporate Acct. No.

Federal Agency Acct. No. or
Postal Service Acct. No.FROM: (PLEASE PRINT) PHONE 512.823-1008

TO: (PLEASE PRINT) PHONE ()

Patsy Spears
 IBM Corporation
 Intellectual Property Law
 11400 Burnet Rd
 Austin, TX 78758

U.S. Patent & Trademark
 office
 P.O. Box 2327
 Arlington, VA
 Attn: Box Patent Apps

ZIP + 4

 2 2 2 0 2 +

 PRESS HARD.
 You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811

www.usps.com


Mailing Label
 Label 11-B August 2000